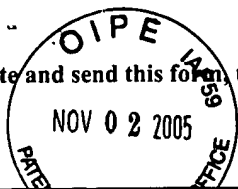


PART B : FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

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23639 7590 09/28/2005

**BINGHAM, MCCUTCHEN LLP
THREE EMBARCADERO CENTER
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Rebecca M. Klits	(Depositor's name)
<i>Rebecca M. Klits</i>	(Signature)
Nov. 2, 2005	(Date)

11/07/2005 MAHMED2 00000057 071850 10043615

01 FC:2501 700.00 DA
02 FC:8001 6.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/043,615	01/08/2002	Vincent P. Stanton	266/118	6401

TITLE OF INVENTION: BASE-MODIFIED NUCLEOTIDES AND THEIR USE FOR POLYMORPHISM DETECTION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	12/28/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
RILEY, JEZIA	1637	435-091100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Squire, Sanders & Dempsey L.L.P.**
 2
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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Sequenom, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)
San Diego, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *Bernard F. Rose*
 Typed or printed name **Bernard F. Rose**

Date 2 NOV 05
 Registration No. 42,112

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/043,615	
	Filing Date	January 8, 2002	
	First Named Inventor	Vincent P. Stanton	
	Group Art Unit	1637	
	Examiner Name	Jezia Riley	
Total Number of Pages in This Submission (excluding references)	3	Attorney Docket Number	37291.3

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Postage Paid Return Postcard	<input type="checkbox"/> Drawing(s) In/Formal ___ Sheets with Submission of Drawings Transmittal	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Response (pages)	<input checked="" type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate) (2 pages)	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
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<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Request for Status of Application
<input type="checkbox"/> Petition for Extension of Time (___ month) (in duplicate)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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<input checked="" type="checkbox"/> Express Mail Label No. EV 721 159 026 US	<input type="checkbox"/> Request for Refund	
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Bernard F. Rose, Reg. No. 42,112
Signature	
Date	November 2, 2005

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service via Express Mail # EV 721 159 026 US in an envelope addressed to: Mail Stop Issue Fee: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date below:			
Typed or printed name	Rebecca M. Klits		
Signature		Date	November 2, 2005